

471-000-509 Nebraska Medicaid Home Health Agency Fee Schedule

| Procedure Code | Description | Medicaid Allowable | Units of Service* |
|----------------|--|--------------------|-------------------|
| G0151 | Brief physical therapy service in home health setting (1-8 units) | \$102.41/visit | 15 minutes |
| G0152 | Brief occupational therapy service in home health setting (1-8 units) | \$102.41/visit | 15 minutes |
| G0153 | Brief speech-language pathology service in home health setting (1-8 units) | \$102.41/visit | 15 minutes |
| G0154TD | Brief RN service in home health setting (1-8 units) | \$88.19/visit | 15 minutes |
| G0154TE | Brief LPN service in home health setting (1-8 units) | \$88.19/visit | 15 minutes |
| G0156 | Brief Aide service in home health setting (1-8 units) | \$54.47/visit | 15 minutes |
| S9122 | Hourly Aide service in home health setting | \$22.28/hourly | 1 hour |
| S9123 | Hourly RN service in home health setting | \$35.86/hourly | 1 hour |
| S9124 | Hourly LPN service in home health setting | \$24.54/hourly | 1 hour |
| S9123TG | Hourly RN service in home health setting for high tech service | \$43.19/hourly | 1 hour |
| S9124TG | Hourly LPN service in home health setting for high tech service | \$31.03/hourly | 1 hour |
| S9123UN | Hourly RN service in home health setting for 2 client at the same time | \$32.40/hourly | 1 hour |
| S9124UN | Hourly LPN service in home health setting for 2 clients at the same time | \$23.28/hourly | 1 hour |
| T1022TG | Daily nursing service for ventilator dependent clients 21 and older in home health setting | \$743.29 | 1 day |

***Bill only for the number of units actually provided.**

Limitations:

For clients age 21 and older, Medicaid does not cover therapy sessions in excess of 60 session per fiscal year (July1-June 30) for any combination of physical therapy, occupational therapy and speech therapy (471 NAC 14-004, 17-004, 23-004).

\$234.86/day- Daily payment limit on skilled nursing services for persons age 21 and older in a home health setting.

\$743.29/day – Daily payment limit on skilled nursing services for persons age 21 and older who are ventilator dependent in a home health setting.